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NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Mar 17, 1999 8:00 am  
Secretary of State

03-17-1999 90048 004 \*\*\*\*61.25

007003

DOCUMENT # N93000005202

1. Corporation Name

LOSCO WOODS HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

4649 HARPERS FERRY LANE  
JACKSONVILLE FL 32257  
US

Mailing Address

4649 HARPERS FERRY LANE  
JACKSONVILLE FL 32257  
US



2. Principal Place of Business

21 11130 Losco Junction DR S

Suite, Apt. #, etc.

22 City & State

23 Jacksonville FL

24 32257 25 Duval

26 32257 27 Duval

28 32257 29 Duval

29 32257 30 Duval

30 32257 31 Duval

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65 32257 66 Duval

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2a. Mailing Address

26 11130 Losco Junction DR S

Suite, Apt. #, etc.

27 City & State

28 Jacksonville FL

29 32257 30 Duval

31 32257 32 Duval

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3. Date Incorporated or Qualified

11/17/1993

4. FEI Number

59-3214103

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

9. Name and Address of Current Registered Agent

DENZIO, RICHARD C.  
4649 HARPERS FERRY LANE  
JACKSONVILLE FL 32257

10. Name and Address of New Registered Agent

81 Name

LYNN Neal

82 Street Address (P.O. Box Number is Not Acceptable)

11130 Losco Junction DR S

83

84 City

JACKSONVILLE

FL

85 Zip Code

32257

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE Lynn Neal

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

3-13-99

12. OFFICERS AND DIRECTORS

TITLE VPD ☐ DELETE

NAME NEAL, LYNN

STREET ADDRESS 11130 LOSCO JUNCTION DR S

CITY-ST-ZIP JACKSONVILLE FL 32257

TITLE D ☒ DELETE

NAME MAPLES, CHESTER

STREET ADDRESS 11260 LOSCO JUNCTION DR S

CITY-ST-ZIP JACKSONVILLE FL

TITLE D ☐ DELETE

NAME DIMARCO, ROBERT

STREET ADDRESS 11252 LOSCO JUNCTION DR S

CITY-ST-ZIP JACKSONVILLE FL

TITLE S ☐ DELETE

NAME COPELAND, KAREN

STREET ADDRESS 11132 STONEY POINT LANE WEST

CITY-ST-ZIP JACKSONVILLE FL

TITLE DT ☐ DELETE

NAME IMLER, BRIAN

STREET ADDRESS 11149 LOSCO JUNCTION DR S

CITY-ST-ZIP JACKSONVILLE FL

TITLE PD ☐ DELETE

NAME DENZIO, RICHARD C.

STREET ADDRESS 4649 HARPERS FERRY LANE

CITY-ST-ZIP JACKSONVILLE FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE President-Director ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE Director ☐ Change ☒ Addition

2.2 NAME Robert Randall

2.3 STREET ADDRESS 4633 HARPERS FERRY LN

2.4 CITY-ST-ZIP JACKSONVILLE FL 32257

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE Vice President-Director ☒ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-13-99 (904) 262-4973

Date

Daytime Phone #

CR2E037 (11/98)